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<b>SERIAL NUMBER</b> 09/346,794	<b>FILING OR 371(c) DATE</b> 07/02/1999 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> NMEDP001-2
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/030,482 02/25/1998 ABN and claims benefit of 60/039,204 02/28/1997

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*  
 \*\* 07/28/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 4	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 10
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Niml JR</i> Initials: <i>NSB</i>				

## ADDRESS

25225

TITLE METHODS FOR IDENTIFYING AGONISTS AND ANTAGONISTS OF HUMAN T-TYPE CALCIUM CHANNELS  
 NOVEL HUMAN CALCIUM CHANNELS AND RELATED PROBES, CELL LINES AND METHODS

<b>FILING FEE RECEIVED</b> 689	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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